

Arizona Department of Health Services Office for Children with Special Health Care Needs Integrated Services Grant



ISG – Parent Action Council July 13, 2006 Meeting Minutes

Attendees: Barbara Bower, Linda Hamman, Gretchen Jacobs, Twila Pochoema, Ramona Quihuiz, Linda Strayer, Mark Trombino

MEETING	SPEAKER	DISCUSSION	ACTION ITEMS
ITEM			
Pre-meeting		The ISG Parent Action Council met on July 13, 2006 for their summer quarterly	*Visit <u>www.azis.gov</u>
notes		meeting. This meeting was a decision-making meeting in regards to the	website for all current
		following:	ISG Task Force and
		*ISG PAC Hospital Grievance Project (defining)	Committee
		*ISG PAC Family Profile; (review/edit and advise)	information.
		*ISG Cultural Competency Community Survey; (review/edit and concur/dissent)	
		*the Medical Home Screening Instruments packet recommended to the ISG Task	
		Force from the ISG QI Clinical Committee; (review, concur/dissent), and	
		*GAPS Questionnaires (Guidance for Adolescent Preventive Services) (review,	
		concur/dissent)	
Welcome and	Linda Hamman,	Linda Hamman, Health Program Manager III for ADHS-OCSHCN welcomed all	
Introductions	ADHS-	the ISG Parent Action Council members to the meeting. Twila Pochoema from	
	OCSHCN	the Hopi Nation joined the meeting via conference calling.	
		There were no new attendees at this meeting and the ISG PAC members are all	
		familiar with each other, therefore, no formal introductions took place.	
Announcements	Linda Hamman	The ISG Parent Action Council has been invited to attend the July 25, 2006	
		meeting of the ISG Quality Improvement (QI) Clinical Committee, if they so desire.	

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Announcements (con't)	Linda Hamman	Additionally, with Marta Urbina leaving ADHS-OCSHCN, a bit of a restructure of the committee has been done. The ISG Parent Action Council will have co-chairpersons and we are pleased that Ms. Barbara Bower and Mr. Mark Trombino have stepped up to volunteer for that. Ms. Linda Strayer has volunteered to be the "nag", to keep us all on point with appointments and communications. And I will be your support. We want to get some work done in here. We don't want this to be just about process. Some work will have to be done outside the meeting times. The quarterly meetings should lean more towards reporting of what we are working	*Structure of ISG PAC Committee will be to have co-chairs; Ms. Barbara Bower and Mr. Mark Trombino.
		on and areas of concern. ISG PAC is a review mechanism for the IS Grant. Reviewing everything that is produced by other committees, etc. So we will have documents coming to us at any given time. I will try to send these through the mail so you have time to review before initiating a meeting or conference call. If we do the review work outside the committee meeting, we can come to the meetings with the recommendations (or consensus) we would like to move forward with.	
Handouts		The 7-13-06 ISG PAC Meeting Handouts were as follows: *Agenda *4-13-06 Meeting Minutes *ISG PAC Family Profile *ISG Cultural Competency Community Survey *Medical Home Screening Instruments Packet *GAPS Questionnaires (Guidance for Adolescent Preventive Services) *ISG PAC Action Matrix updated 7-11-06 *ISG Project Abstract Form *CRS Grievance Policy *ISG PAC Hospital Grievance Project NET Resource Listing *ISG Links to Partners Website Listing *ISG PAC Action Items from Minutes Report (all meetings) *ISG Year One Progress 2005-2006/Purpose, Goals, Tasks *Emergency Room Task Force Notice from ADHS *Education/Training Tracking Form (PAC-specific form) *Evaluations	

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	Mark Trombino	Raised the question if the new ADHS Emergency Room Task Force was for	*Is ADHS ER Task
		special needs. Ms. Hamman explained that it was all encompassing whereby the	Force addressing
		ER Task Force is looking at how fast you get to the ER and what happens when	special needs?
		you get there. What would be a good idea is if someone from the Council joined	
		the Task Force, whereby they could bring those issues to the table.	
	Linda Strayer	As one of our goals is to report on what is going on with our communities and	*Reporting on
		how parents are involved; how do you want that reported and to whom?	community activities,
			parental involvement,
		Ms. Hamman clarified that the reporting of activities and such would be made to	etc. will be made to
		her.	Linda Hamman.
Review/Trainings	Linda Hamman	What are the trainings that are taking place or that you are attending? I believe a	*Linda H. to send out
		Training Log was sent out to everyone but I will send it out again.	the Training Log to the
			members. A Training
		Ms. Strayer reminded the group of the upcoming training conference.	Conference is pending.
Review/4-13-06	Linda Hamman	Please provide any comments or clarification on the minutes.	*ISG PAC accepted
Meeting Minutes			the 4-13-06 meeting
		The ISG PAC reviewed the minutes and accepted them without corrections.	minutes without
			corrections.
Review/ISG PAC	Linda Hamman	Is there anything to change on the Family Profile? We had been finalizing this	*Profile to be used for
Family Profile		from the 4-13-06 meeting and had worked on it with the conference calls.	parents to fill out
			*ISG PAC consensus
		The group added some text to the Family Profile. Also made some typographical	for Family Profile
		and formatting changes. There was a brief discussion on if the therapy or	(draft) to go to other
		services provided in school settings should be listed. The group suggested that	ISG Committees for
		any school information could be listed under the #2 section line item of "Other	review and feedback.
		services/supports you want to mention".	
		The ISG PAC gave consensus that the Family Profile could go to other ISG	
		Committees for review and comment.	
	Linda Hamman	One of the surveys the Parent Leaders use is the Family Satisfaction Survey, and	*Are the surveys
		it includes similar questions as the surveys we are reviewing today. A concern	helping families to
		I had is that if we are asking all these life questions to families along with service	achieve the outcomes
		questions, (are you getting services, are you pleased with services, etc.); is it	they wish to achieve?
		really improving quality of life as a family. Is it helping the family to achieve	
		the outcomes they wish to achieve?	

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Review/ISG	Linda Hamman	We have some documents to review from various ISG Committees. The	*See final page of
Cultural		Community Survey comes from the ISG Cultural Competency Committee. The	minutes for ISG PAC
Competency		Medical Home Screening Instruments packet is from the ISG QI Clinical's May	feedback on all
Community		2006 Task Force recommendations. And the GAPS Questionnaires (Guidance to	topics/documents for
Survey; ISG QI		Preventive Adolescent Services) comes from the ISG Adolescent Health	review
Clinical's TF		Community Advisory Group. Please take a moment for review and we can then	
Recommendation		comment when you are done. The group took time for their review.	
packet of			
Medical Home		Please see attached documentation that outlines the feedback from the ISG	
Screening		Parent Action Council on:	
Instruments; and		*ISG Cultural Competency Committee's Community Survey	
the GAPS		*GAPS Questionnaires (Guidance for Adolescent Preventive Services	
Questionnaires		Questionnaires)	
		*ISG QI Clinical Committee's May 2006 Task Force Recommendation of the	
		Medical Home Screening Instruments	
		Contained within this packet were the screening tools of:	
		-The Children with Special Health Care Needs (CSHCN) Screener	
		-PEDS (Parents' Evaluation of Developmental Status)	
		-M-CHAT (Modified Checklist for Autism)	
		-PSC (Pediatric Symptom Checklist)	
		-CRAFFT (14-18 year old self-report on substance abuse)	
		-Dental Screen from the Association of State and Territorial Dental	
		Directors	
	Group	As the ISG PAC reviewed and discussed the documents, some observations were	*Internet now has
	discussion	as follows:	"testing" resources for
		-PEDS-like test is on the Internet, whereby, nothing like that was ever on the	autism. Parents take
		Internet before. Parents can answer the questions and get a score. It was agreed	test via Internet and
		that the parents should still see a doctor and verify.	get scores. Is it
		-The word autism is still a bit scary for parents to hear. By the mere fact that the	reliable? Still need a
		provider is initiating some of the tools to the parents or child, are we alarming	doctor.
		parents? Will they automatically think something is wrong with their child	*Autism is still an
		because the provider wants to administer these tools and/or questionnaires? On	alarming word to use
		the other hand, it was also observed that disbursing the information may get the	*If a care coordinator
		parents thinking in the direction they need to think.	is used, do the
			outcomes improve for

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		-Do the outcomes for children and families improve if a care coordinator is stationed at the care facility and coordinates the services? -Some providers are taking the lead and using screening tools already in their practicesNew disability screening tool is out for age 3 that centers around if the child is disabled but not showing any defined symptoms.	the family and the child? *Screening tools are being initiated by existing providers *New disability screening tool for age 3. Disabled but not showing? Does this tool have a name?
	Linda Hamman	All the tools will help us. They help ask the question of what are those things you would normally be doing for a child 0 to 3; and then further determine, what is or where is, the child functioning behind in. It is up to us to find this so we can direct the services better. By determining if they are functioning behind and what area it is, we are better able to catch it in early stages. We can also find out if a child is functioning at the level that services are needed. Do they need early intervention? Can we assess them that they need the chronic-on going services?	
Hospital Grievance Project	Group discussion	The ISG PAC discussed the Hospital Grievance Project. They redefined the project (Grievance and Appeal Process Project) to include hospitals, specific programs within state agencies; and insurance companies. This project will help teach parents how to be advocates. If this information is given to the parent, after their emergency or other issue has passed, they can re-address it, but at least they have been provided the information so they can re-address it. Many parents don't even know they can appeal the service they receive in hospitals or through a state program. Hospitals always try to steer the parents away from filing any type of grievance. The hospitals tell them automatically "it's our policy", etc. Well, we want to know what that policy is. And we want to know if the entity changes the policy based on a grievance and/or appeal filed. How do they follow-through and how do they report back to the families. It will help the parents to feel as though they are taking control of their child's	*Redefined Hospital Grievance Project to the Grievance and Appeal Process Project that will encompass hospitals, specific programs within state agencies, and insurance companies. *Ms. Jacobs to bring in document on how to be an advocate.
		care. We can help by getting the information to them. We are, in essence, educating the parents. And policy can be changed. Even if parents do not get anywhere with a specific grievance, remember that they are building a case.	

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Hospital		The ISG PAC members chose the entities they would research for the project:	*Barb Bower will
Grievance		Grievance and Appeal Process assignments:	contact Jim Murray for
Project (con't)		Gretchen Jacobs –AzEIP	inclusion into the
		ALTCS (AHCCCS Long Term Care System)	project
		Junior League Advocacy Section	*Possible flyers or
		Barbara Bower – St. Joseph's Hospital	brochures to be
		Phoenix Children's Hospital	developed for parents
		Linda Strayer - Cigna	with end results or
		Mark Trombino – Aetna	guidance on how to
			grieve and appeal if
		The PAC members will obtain the grievance and appeal processes from the	involved with targeted
		specific entities.	entities.
			*What other state
			agencies can be
			included?
Update ISG PAC	Group	ISG PAC reviewed the updated copy of the ISG PAC Committee Action	*Redefinition of the
Action Matrix		Planning Matrix document. The PAC Matrix had been updated with the	Hospital Grievance
		objectives and activities noted from PAC's last meeting on 4-13-06.	Project to the
			Grievance and Appeal
			Process Project will be
			noted within the ISG
			PAC Action Matrix.
Questions /	Linda Strayer	I would like to invite other parents from the mental health arena to the next	*ISG PAC to include
Discussion; Items		conference call and the next ISG Parent Action Council meeting in October.	parents from mental
from the Floor		This is in alignment with the Action Matrix.	health arena in
			conference calls and
		Ms. Hamman noted that a new Sickle Cell team is forming and the parents will	future meetings.
		be invited from this group too.	*ISG PAC to invite
			Sickle Cell parents to
			be involved.
			*Invite Renaldo
			Fowler from Arizona
			Disability Law to 10-
			12-06 ISG PAC
			meeting.

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Next Meeting		Next conference call: August 17, 2006 10am-11am	*Linda Strayer will
		Time change on September conference call?	send out conference
		Linda Strayer asked the PAC how far in advance do you want the reminder? It	call and meeting
		was consensus that reminders should go out a week prior to the conference call	reminders one week
		and/or meeting.	prior.
			*Pam to send Linda
		Next ISG PAC Quarterly Meeting	Strayer the 2007
		October 12, 2006 11am-2pm, ADHS Bldg., Room 345A	Schedule of ISG PAC
			Meetings
			*Pam to send Linda
			Strayer the listing of
			project entities chosen
			and by whom.

ISG - PAC Feedback on GAPS

The ISG Parent Action Council concurs with GAPS as a questionnaire type tool that can be used. The feedback (7-13-06) is as follows:

- -Covers a lot of topics which is good but could mean adolescents won't answer because of length.
- -Will adolescents answer it parents will answer the Parent/Guardian but what about teens?
- -Administer in a safe environment and give time to complete.
- -Not enough space on forms to list medical history and medications of CYSHCN.
- -Make sure it stays confidential
- -Confidential is in a different font size and location on the questionnaires
- -Reading level on the questionnaires is too high
- -The font and size is not easily readable
- -The questionnaire should be available in alternative formats for different special needs

ISG - PAC Feedback on Community Survey

The ISG Parent Action Council provided feedback (7-13-06) on the ISG Cultural Competency's Community Survey as follows:

-Correlate with AzEIP questionnaire sent to parents (involves a release). AzEIP questionnaire is similar.

- -Where will this go?
- -What are you trying to accomplish?
- -How will it be administered?
- -How will results be given back to the community? Results *need* to get back to the community.
- -After population has been surveyed, redistribute a thank you back to the surveyed population.
- -Do they or will they read and use the information (whoever initiated survey)
- -Quantify the results
- -Survey will help under-served community needs on reservations

<u>ISG PAC Feedback on Medical Home Screening Instruments Packet</u> (QI Clinical's May 2006 Recommendations to the ISG Task Force – inclusion in ISG Care Coordination Study)

The ISG Parent Action Council concurs with the QI Clinical Committee's Task Force recommendation of the Medical Home Screening Instruments packet. The feedback (7-13-06) is as follows:

- -Define the steps of administrating the tools.
- -Who is going to help administer them?
- -What are the logistics of the project (Care Coordination Study <aka Medical Home Project>)?
- -How are the tools going to be implemented?
- -Need to answer questions without distractions. Safe environment.
- -Using word autism is alarming still, may wish to be careful (RE: M-CHAT tool / footnote reference can we take the footnote off?)
- -PAC is pleased that screening tools are becoming more prevalent. Parents need to know that these tools and other resources are available to help them with diagnosis, caring of, and service coordination of their special needs children.